Spring 2008
Volume XXXII, Number 1

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CPHA•ACSP health digest
CANADA'S PUBLIC HEALTH LEADER
LE LEADER CANADIEN EN SANTÉ PUBLIQUE

ANNOUNCEMENT FROM CPHA'S CHAIR

CPHA Announces Development of a New Process to Support Public Health Policy Development and Action

In the fall of 2006, CPHA's Board of Directors began a review of CPHA's policy development process to ensure that:

- CPHA continues to be the authoritative, non-governmental voice for public health in Canada, and an international public health leader;
- CPHA is flexible and nimble, able to react quickly to important public health issues in a number of forums;
- strategic priorities are set annually to focus the work and resources of the Association while maintaining its ability to act on urgent matters.

In order to meet these objectives, the CPHA Board of Directors is initiating changes to ensure that our policy and position statements are consistently relevant, timely and effective. It has been recognized over the years that CPHA's resolution process has been limited in its effectiveness to address pan-Canadian public health issues on a timely, proactive basis. To remedy this problem, the Board will be establishing a new comprehensive approach working on many fronts throughout the year, involving the membership, the Board of Directors, CPHA's Advisory Council and issue-specific expert working groups.

The process for 2008 will begin to reflect these changes and is part of an overall review of how the Association sets and acts on public health policy issues.

A Working Committee of the Board has been established to map out the details of this new system. Discussions have also been held with the Advisory Council to explore the role that they could play in identifying policy issues, working with the Board and the membership on policy direction and content. The Board is also looking for a new and improved process to engage members in direct and concrete action which will have an impact on the public health policy landscape in Canada. We foresee that the changes being explored and implemented will improve the Association's work in this area.

Ron de Burger, CPHA Chair

2008 Process

As noted, this is a year in transition as the Board completes its work on fully defining all of the activities that will ultimately make up CPHA's comprehensive policy development process. This year there is no call for resolutions. Instead we will begin to implement and evaluate a series of opportunities for discussion and review of policy issues and options for action.

- Environmental Scan
  CPHA's Advisory Council presented the results of an environmental scan to the Board of Directors in February 2008. As you know, the Advisory Council is made up of the Provincial/Territorial Public Health Associations and Public Health Partner Organizations.

- Membership Survey
  CPHA will be surveying its 1,200 members in April 2008. This will help to validate and further prioritize issues and provide an opportunity for all CPHA members to provide input on

...see Policy, page 12

Public Health in Canada:
Reducing Health Inequalities
Through Evidence and Action

La santé publique au Canada :
Vers une réduction des inégalités
en santé par la recherche et l'action

www.cpha.ca

Canadian Public Health Association
2008 Annual Conference
1-4 June 2008
World Trade and Convention Centre
Halifax, Nova Scotia

In partnership with the Canadian Institute for Health Information – Canadian Population Health Initiative, the Canadian Institutes of Health Research – Institute of Population and Public Health, the National Collaborating Centres for Public Health and the Public Health Agency of Canada.

In association with the Public Health Association of Nova Scotia.

CPHA *health digest*
Canadian Public Health Association

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Executive Managing Editor:
Debra Lynkowski

Coordination & Production:
Ian Culbert

Assistant Editor:
Karen Craven

Circulation:
Doris Amo

Translation:
Marie Cousineau

Mission Statement

The Canadian Public Health Association is a national, independent, not-for-profit, voluntary association representing public health in Canada with links to the international public health community. CPHA's members believe in universal and equitable access to the basic conditions which are necessary to achieve health for all Canadians.

CPHA's mission is to constitute a special national resource in Canada that advocates for the improvement and maintenance of personal and community health according to the public health principles of disease prevention, health promotion and protection and healthy public policy.

CEO'S COLUMN

2008: The Way Forward

In January 2007, the Board of Directors approved CPHA's Strategic Plan for 2007-2017. The plan addresses the Association's need to be strategic in the range of activities it undertakes, with the ultimate goal of maximizing our impact on the current and future state of public health in Canada and around the world. As we continue to move forward with implementation of the plan, CPHA will focus on the following areas in the year to come:

Financial stability and growth

During the past five years, we have seen a dramatic decrease in funding from government sources. A review of CPHA's revenue-generating activities will identify ways to maximize revenue while the Association looks to new revenue sources to ensure its financial success. CPHA will also expand its partnership program with corporations and foundations, the values of which are compatible with the public health mandate.

Collaborative relationships

CPHA partners with many other organizations in order to address the strategic priorities set by the Board and strengthen our collective voice. In 2008, we will focus on the evolving role of the Advisory Council and revitalizing the work of the Canadian Coalition for Public Health in the 21st Century.

Public health sector capacity

CPHA has a long history of contributing to the capacity of the public health sector in Canada and around the world:

- CPHA's Annual Conference, a flagship event for the Association, will build on its increasingly strong programming and will further increase student participation.
- The Canadian Journal of Public Health will be strengthened as we take the steps to make the past 10 years' editions available online.
- CPHA will continue to play a lead role in public health human resources issues.
- CPHA's funded project activities have contributed greatly to the development and transfer of important public health knowledge. In order that public health capacity continues to be enhanced, we will identify ways to promote innovative work of projects such as the:
  - Early Detection and Response Course for Health Professionals in Canada
  - Strengthening Chronic Disease Prevention and Management: A Regional Pilot Project, and
  - Expert Panel on Health Literacy.
- In global health, CPHA will begin to implement the Global Public Health Strategy (profiled on page 12 of this issue).
- We will also continue to act as Secretariat for the National Specialty Society for Community Medicine and the Canadian Coalition for Immunization Awareness and Promotion.

Education and advocacy

More than ever, CPHA needs to lead critical policy debates. Over the coming months, we will be increasing our capacity to actively monitor and respond to emerging

...see CEO's Column, page 12

Annual General Meeting

The Annual General Meeting of the Canadian Public Health Association will be held at the World Trade & Convention Centre in Halifax, Nova Scotia on Tuesday, June 3, 2008 at 4:30 pm.

2008 Call for Nominations for the Board of Directors

Introduction
The Canadian Public Health Association's (CPHA) Nominating Committee is responsible for filling vacant positions on the Board of Directors to ensure the Association is governed with excellence and vision. The Committee achieves this goal through actively soliciting nominations from CPHA members and accepting nominations from a call.

Taking into account the skills required by the Board for 2009 and 2010, the Nominating Committee will recommend to the Board a slate and/or elections for review and approval in October 2008.

The Board of Directors and the Nominating Committee have identified the position of Chair Elect as an integral part of CPHA's Board succession planning process to ensure continuity for the Association's future. Current Board members will be asked by the Board Chair to indicate their interest in the Chair Elect position and names will be forwarded to the Nominating Committee.

Current 2008 Board Members & Term Completion
- Ron de Burger, Chair (Ontario)
  December 31, 2008
- Cordell Neudorf, Chair Elect (Saskatchewan)
  Term of Chair Elect ends December 31, 2008 followed by a two-year term as Chair
- Erica Di Ruggiero, Director (Ontario)
  December 31, 2009
- Joel Finlay, Director (British Columbia)
  December 31, 2009
- Lynn McIntyre, Director (Alberta)
  December 31, 2008
- Jennifer Spencer, Director (Ontario)
  December 31, 2008
- Ingrid Tyler, Student Director (Ontario)
  December 31, 2009
- Paul Hanvey, External Director (Treasurer) (Ontario)
  December 31, 2009
- Maureen Law, External Director (Ontario)
  December 31, 2009
- Sue Hicks, Advisory Council (Manitoba)
  December 31, 2009
- John Maxted, Advisory Council (Ontario)
  December 31, 2008

Nominating Committee:
- Nancy Kotani, Chair (British Columbia)
- Ron de Burger, CPHA Chair (Ontario)
- Cordell Neudorf, CPHA Chair Elect (Saskatchewan)
- Brent Friesen, CPHA Member (Alberta)
- Vicki Lafferty, CPHA Member (Northwest Territories)
- Catherine Donovan, CPHA Member (Newfoundland and Labrador)

The Call
The Nominating Committee is seeking nominees who are experienced, passionate, committed and skilled individuals to lead CPHA into the future. The Nominating Committee presents this Call for Nominations for 2008 for 3 of the 12 Director positions. All terms of office are for two years.

The Committee is looking for members with two or more of the following skills in order to ensure that the Association continues to be governed by excellence and vision and that key strategic priorities of the Association are addressed:
- Governance experience
- Public Health systems knowledge
- Leadership in non-profit field
- Risk management
- Financial planning
- Legal knowledge
- Research/Academic sector knowledge or experience
- Sponsorship and fundraising
- Revenue diversification
- Communications
- Membership development
- Policy development

The Nomination Requirements
The nominations for Director shall be in writing and signed by the nominee indicating his/her consent to be a candidate and by at least three (3) persons (nominators) who are members in good standing and are entitled to vote at an election. Any member in good standing shall be eligible for the office of Director, without regard to geographic location.

Nomination papers must be received by the office of the Chief Executive Officer, addressed to the Nominating Committee, on or before **5pm EST June 30, 2008.**

The nomination form must be accompanied by:
- completion of the skills questionnaire on the reverse side of the form;
- a summary curriculum vitae of the candidate (max. 1 page);
- a brief description (up to 250 words) from the candidate indicating how his/her experience fits with the skills and strategic areas being sought by the Nominating Committee;
- the signatures of the three (3) nominators.

The summary c.v. and the brief description may be published.

Each Nominee and Nominator must be a member in good standing of CPHA.

For a copy of the Call for Nominations and Forms, go to www.cpha.ca, or contact the CEO's office at ceo@cpha.ca or by calling 613-725-3769, ext. 127.

Thank you from the HIV/AIDS and Substance Use/Addictions Affiliates to the CHN

The Canadian Health Network (CHN) is coming to a close as of March 31, 2008.

The decision to close the CHN was made by the Public Health Agency of Canada (PHAC) as part of a program reduction exercise. It reflects, among other things, the changing mandate and priorities of the Agency and how it delivers public health information.

Beginning April 1, 2008, Canadians will be able to access timely, trusted and credible public health information through a single source – the Public Health Agency of Canada's web site at www.publichealth.gc.ca. Accessed by over 10 million visitors a year, PHAC's web site offers a valuable and unique source for information on healthy living, disease and injury prevention.

CPHA has been proud to act as the HIV/AIDS and Substance Use/Addictions Affiliates to the CHN, and we would like to sincerely thank all those who made the CHN a success, from its network of contributors to its end users.

To ensure that the information on HIV/AIDS and Substance Use/Addictions provided through the CHN web site continues to be accessible to Canadians, we will be posting it on the CPHA web site. This includes our Frequently Asked Questions and articles. We are also looking at ways to make our collection of web links available – and to continue to work in collaboration with organizations like yours. We will keep you posted.

If you have any questions, please do not hesitate to contact Ian Culbert at (613) 725-3769, extension 142 or by email at iculbert@cpha.ca. ♣

Health info for every body

CPHA Publication Sales

New name... same great service!

For more than 20 years, CPHA Publication Sales (formerly known as the Health Resources Centre) has been developing an extensive catalogue of publications of interest to public health professionals and the general public. CPHA Publication Sales sells the World Health Organization's and the Pan American Health Organization's publications, periodicals and videos/DVDs, CPHA's own publications, and those of numerous private North American publishers.

We invite you to visit the new web site at http://www.cpha.ca/en/publications.aspx to see the excellent range of new publications available for sale. Contact us at our new e-mail address: publications@cpha.ca, or by telephone at 613-725-3769. ♣

www.health-evidence.ca

An Online Resource for Public Health Decision Makers

www.health-evidence.ca is a free, searchable online registry of research evidence evaluating the effectiveness of all public health interventions. It saves time and money by eliminating the need for public health decision makers to search for, retrieve, assess and synthesize evidence about the impact of public health interventions. This results in more efficient and effective delivery of public health programs and services. There are more than 1,100 systematic reviews available through www.health-evidence.ca. ♣

The Doctor Jean C. Nelson Memorial Award Recipient Announced

The Board of Directors of the Doctor Jean C. Nelson Memorial Foundation are pleased to announce that Caroline McAuley of Vermillion has been selected as the recipient of the Dr. Jean C. Nelson Memorial Award for 2007. She will receive a bursary of two thousand dollars.

Ms. McAuley has a Bachelor of Science Degree in Foods and Nutrition from the University of Alberta and is currently enrolled full time in the Master of Business Administration Program in Community Economic Development at the University of Cape Breton. She has maintained an honours average in her studies while working full time as a Health Promotion Facilitator with the Healthy Weights Initiative in East Central Health Region. Ms. McAuley has 18 years of experience in health care and has made contributions in regional, provincial and national capacities. She is committed to working in partnership with others and has been a strong advocate for the role of health promotion. For her research, Ms. McAuley plans to focus on food security and/or school health for children and youth living in rural Alberta.

The Doctor Jean C. Nelson Memorial Award is given annually to a graduate student who best meets the criteria based on the late former Alberta Deputy Minister of Health and Social Services, Dr. Jean Nelson's commitment to community health and services for children.

Information regarding application for this award is available on the Alberta Public Health Association (APHA) website, www.apha.ab.ca. Inquiries may be forwarded to the Board of Directors of the Doctor Jean C. Nelson Memorial Foundation. Donations to the fund are welcome and are tax deductible. ♣

STUDENT *Corner*

Meet your Student Director

Ingrid Tyler, CPHA Student Director

Hello CPHA Student Member!

My name is Ingrid Tyler. I am a Community Medicine Resident at the University of Toronto and your new Student Director on the Canadian Public Health Association's (CPHA) Board of Directors. I am replacing Colleen Davison, who worked throughout her term to establish a greater student presence within the CPHA community. Her accomplishments included the formation of a Student Ad Hoc Committee with the mandate of building student engagement in CPHA, a Student Editorial Team who publish regularly in the CPHA Digest, and the addition of a student representative to the CPHA Conference Planning Committee. The student representative in question, Sarah Viehbeck, has worked with the conference partners to facilitate student-oriented opportunities related to the conference planning and program such as the Student Travel Bursary program, student participation in the abstract review process, a Student Breakfast and a pre-conference workshop. Look for student activities in the program – they are highlighted with a special icon.

I am writing today for a few reasons. First, I wanted to introduce myself and let you know that I am only an e-mail or phone call away if you have any questions, concerns or want to get in touch with me about any issues related to students, public health and/or CPHA. A new e-mail address has been set up: students@cpha.ca. E-mails sent to this address are forwarded directly to the current Student Director, so you will always know that comments are going to the right person.

Second, I wanted to invite you all to become involved in CPHA student activities. We are actively looking for new members on the Student Ad Hoc Committee as well as a new student representative for the 2009 CPHA Conference Planning Committee. There is also the student Editorial Group. If you might be interested in getting involved in any of these activities, please send me an e-mail introducing yourself or asking for more information.

Finally, if you have input for CPHA at any time about how we can serve you better, how you might be able to contribute your own skills, or any other matter, please don't hesitate to contact me. I will keep you updated every few months with further opportunities and events at CPHA.

Thank you. I look forward to the exciting opportunities ahead, and I wish you all continued success in your studies!

Sincerely,

Ingrid Tyler
CPHA Student Director
ingrid.tyler@utoronto.ca

...see Student Corner, page 7

The National Collaborating Centre for Healthy Public Policy (NCCHPP) officially launches its website

On March 30, 2008, the National Collaborating Centre for Healthy Public Policy (NCCHPP) officially launched its website. This website offers many resources for the public health community such as short reports, popularization documents, workshop reports, discussion group reports, and other interactive exchange reports, etc.

This month, the NCCHPP presents a multi-media interactive tool that illustrates the evolution of the tobacco story in Canada.

Also newly available on our website is a bi-weekly E-Bulletin that will help inform of the latest news, events and information in healthy public policy. To subscribe, go to: http://www.ccnpps.ca/en/bulletins.aspx

The National Collaborating Centre for Healthy Public Policy is part of a pan-Canadian network of six centres funded by the Public Health Agency of Canada. The NCCHPP focuses on public policy with a potential impact on social, economic and environmental determinants of health. Our goal is to support the efforts of the Canadian public health community in promoting healthy public policy through more informed strategies. We work to make research available and accessible to public health practitioners; foster linkages among researchers, the public health community and other stakeholders; and promote the sharing of knowledge.

Come and visit us online at http://www.ncchpp.ca and discover a great a source of information for public health actors interested in healthy public policy.

Answers To Your Healthy Eating Questions Are Just a Phone Call or Click Away

Do you or your clients have questions on nutrition? Get an answer from a source you can trust for free! Dietitians of Canada and the Ontario Ministry of Health Promotion are working together to give the residents of Ontario more ways to connect with a Registered Dietitian. The service is available to the general public, as well as health professionals and community leaders. Whether you have questions about managing diabetes, nutrient content of foods, supplements for sports, introduction of solid foods to infants, weight loss, coping with picky eaters or food safety …this service is for you.

Connect to EatRight Ontario in three different ways:

1. Talk to a Dietitian
Call 1-877-510-510-2, Monday to Friday, 9am-5pm ET toll free from anywhere in Ontario and speak directly to a Registered Dietitian who is qualified and ready to help. Dietitians can answer your healthy eating questions, send you added information and even put you in touch with community services. The service is available in English, French, Cantonese, Spanish and numerous other languages.

Welcome to EatRight Ontario!

EatRight Ontario has been designed to help you improve your health and quality of life through healthy, nutritious eating.

2. Email a Dietitian
Click on "Ask a Dietitian" at the EatRight website. Email your nutrition question 24 hours a day, 7 days a week. A Registered Dietitian will email you a personal reply in 3 business days or less!

3. Visit the EatRight Ontario Website
Explore www.Ontario.ca/EatRight by topic or searching through an online library of nutrition information. It also offers articles on popular nutrition topics, answers to frequently asked questions, tips and recipes.

This service provides general nutrition information only. EatRight Ontario Dietitians cannot provide individual in-depth counseling or medical advice. Connect with EatRight Ontario and start making healthier food choices today!

The Institute of Circulatory and Respiratory Health (ICRH)

2008 Young Investigators (YI) Forum

Photo © Tourisme Montréal, Stephan Poulin

8-10 May 2008 • Le Centre Sheraton Montréal Hotel • 1201 Boulevard René-Levesque West, Montréal, Québec
Please visit the website for further updates at http://www.cihr.gc.ca/e/8663.html

Student Corner, *from page 5...*

Arsham Alamian, PhD Candidate, Department of Social and Preventive Medicine, Faculty of Medicine, University of Montreal, Montreal, QC

Kelly Skinner, PhD Candidate, Department of Health Studies and Gerontology, Faculty of Applied Health Sciences, University of Waterloo, Waterloo, ON

Burden of chronic diseases

Chronic diseases, including cardiovascular disease, cancer and diabetes, are the leading causes of morbidity and mortality worldwide.[1] Many of these diseases share common modifiable risk factors, including cigarette smoking, physical inactivity, unhealthy diets, alcohol drinking and obesity.[2] These risk factors are prevalent among Canadian youth and adults.[3,4] By reducing and preventing these risk factors, we could decrease the incidence of chronic diseases in Canada.

Several resources are available to students interested in chronic disease prevention and control:

- Center for Chronic Disease Prevention and Control (CCDPC) – Public Health Agency of Canada: http://www.phac-aspc.gc.ca/ccdpc-cpcmc/index_e.html

The CCDPC provides valuable information on several chronic diseases, including surveillance data.

- Centre for Health Promotion (CHP) – Public Health Agency of Canada: http://www.phac-aspc.gc.ca/chhd-sdsh/index-eng.php

The CHP addresses the determinants of health by implementing policies and programs, including healthy child development, families, aging and lifestyles, public information and education.

- Department of Chronic Diseases and Health Promotion – World Health Organization: http://www.who.int/chp/about/integrated_cd/en/

This center is responsible for providing leadership and direction for global, regional and national efforts to promote health and to prevent and control major chronic diseases and their risk factors.

CPHA 2008 Annual Conference (Halifax, Nova Scotia, June 1-4)

The upcoming CPHA conference will provide a unique opportunity for students to share and to learn about different issues related to chronic diseases and their prevention. Look forward to one of the planned concurrent sessions which will focus on visioning for the future of chronic disease prevention with an equalities lens and an alignment across multiple systems.

As with the 2007 CPHA conference, student activities will continue to be offered and include student awards and travel bursaries, the student breakfast, student abstract reviewers, and the "grad cap" icon in the program to highlight student presentations. As another student activity highlight, we would like to invite all students to participate at this year's special pre-conference workshop: "Sharing research: Preparing to publish". The objective for this session is to provide attendees an opportunity to explore the writing process for peer-reviewed publications. The workshop will be conducted in two parts: first, a presentation on the writing process itself, and second, a panel discussion on reviewing and editing for publication. The facilitators will be Dr. Gilles Paradis (CJPH Interim Scientific Editor) and Dr. Maureen Malowany, Institut national de santé publique du Québec.

We look forward to seeing you at the conference!

References

1. World Health Organization. Global Forum on Chronic Disease Prevention and Control. Geneva, 2001.
2. Mokdad AH, Marks JS, Stroup DF, Gerberding JL. Actual causes of death in the United States, 2000. *JAMA* 2004;291:1238-45.
3. Boyce W. Young people in Canada: Their health and well-being. Ottawa, ON: Health Canada, Health Behaviour in School-Aged Children, 2004.
4. Heart and Stroke Foundation of Canada. The growing burden of heart disease and stroke in Canada. Ottawa, ON, 2003.

Coming *events*

2008 Young Investigators Forum
Canadian Institutes of Health Research's Institute of Circulatory and Respiratory Health
8-10 May 2008 Montréal, QC
Contact: Katherine Gardner
Institute of Circulatory and Respiratory Health
Tel: 613-941-0086 Fax: 613-954-1800
E-mail: kgardner@cihr-irsc.gc.ca
Website: http://www.cihr.gc.ca/e/8663.html

PREVNet 3rd Annual Conference
Creating a World Without Bullying
29 May 2008 Toronto, ON
Contact: Peter Aitken
PREVNet Network Manager
Tel: 613-533-6000, ext. 79178
OR toll-free 1-866-372-2495
E-mail: peter.aitken@queensu.ca
www.prevnet.ca

2nd National Community Health Nurses Conference
Shaping the Future: Practice, Power, Politics
Community Health Nurses Initiative Group and Community Health Nurses Association of Canada
29-31 May 2008 Toronto, ON
Contact: First Stage Enterprises
Tel: 416-426-7029
www.chnac.ca and www.chnig.org

Canadian Public Health Association
2008 Annual Conference
Public Health in Canada: Reducing Health Inequalities Through Evidence and Action
1-4 June 2008 Halifax, NS
Contact: CPHA Conference Services
E-mail: conference@cpha.ca www.cpha.ca

5th World Conference on Breast Cancer
Heart, Soul, & Science: "It's a Small World After All"
4-8 June 2008 Winnipeg, MB
Contact: Tel: 204-480-4588
E-mail: mail@wcbcf.ca www.wcbcf.ca

18th World Conference on Disaster Management
Resiliency – Individual, Community, Business
The Canadian Centre for Emergency Preparedness
15-18 June 2008 Toronto, ON
Contact: www.wcdm.org

International Nursing Research Conference
Facing the Challenge of Health Care Systems in Transition
29 June-3 July 2008 Jerusalem, Israel
Contact: Diesenhaus Unitours – Convention Department
Tel: 972-3-5651313 Fax: 972-3-5610152
E-mail: meetings@diesenhaus.com
www.d-convention.com/israelnursing

Beyond the Horizon
74th Annual Educational Conference of the Canadian Institute of Public Health Inspectors
20-23 July 2008 St. John's, NL
Contact: www.ciphi.ca/events.htm

Chronic Disease Prevention Alliance of Canada
3rd National Conference
24-26 November 2008 Ottawa, ON
Contact: www.cdpac.ca

Canadian International Immunization Initiative Phase 2 (CIII-2)
CPHA Immunization Project - Technical Assistance and Awareness Components

National Immunization Days: Immunizing Against Polio in Bangladesh

by Kathy Morgan,
CIII-2 Consultant, STOP 26,
September to December 2007

I never would have dreamed that my nursing career would have taken me to where it has today. Recently, I was selected to participate in a three-month STOP (Stop Transmission of Polio) mission overseas to assist with the global eradication of polio – the largest public health initiative in history.

I was assigned to Bangladesh, to the district of Cox's Bazaar in the Chittagong division. My assignment was to provide technical assistance for the 1st and 2nd rounds of the upcoming 16th National Immunization Days (NID). It consisted of a one-day mass immunization campaign by volunteers, followed by four days of house-to-house searches to seek children who had not been vaccinated. Its aim was to interrupt the circulation of wild poliovirus by immunizing every child less than 5 years of age. My role was to participate in the campaigns but also to observe the cold chain and immunization practices, and to review micro plans in order to target hard-to-reach populations.

The work was challenging as it brought me to very remote areas. I went from house to house looking for chalk marks on doors to ensure that the children at every house had been immunized; if there were missed children, we vaccinated them. There are also some 20,000 refugees from Myanmar in Teknaf and Ukhia Upazilla living in makeshift camps and assisted by the UN High Commissioner for Refugees and Médecins sans Frontières. The refugee camps were especially challenging as no chalk marks were used but finger markings instead. With the movement of children from camp to camp, it was difficult to cover everyone. During my mission I also

Working with the children to make sure they were all vaccinated.

experienced the devastating effects of Cyclone Sidr, the worst cyclone since 1991. Fortunately, in Cox's Bazaar they only experienced high winds and heavy rain, but the devastating effect on the southwestern areas of Bangladesh will be felt for decades.

Although the work was challenging, it was very rewarding. I got to learn about the local customs and try many different foods. I wore the traditional dress for women, a salwar kameez, which consists of baggy pants and a long dress. I had fun with the kids on the beach as they entertained me by singing "Oh Canada". Most importantly, I got to meet the many staff members who are involved in the immunization campaigns and was most impressed by their dedication and adaptability.

Throughout my mission, the people of Bangladesh proved their determination and commitment to polio eradication. The National Immunization Days were a huge success, with the mass campaigns vaccinating approximately 25 million children.

Immunization Initiatives Newsletter

In light of National Immunization Awareness Week, April 19th-26th, CIII-2 will be sending you their Immunization Initiatives Newsletter. This newsletter highlights global immunization strategies and provides progress reports on vaccine-preventable diseases.

Revitalizing the Public Health Association of Haiti

Despite serious socio-economic problems and ongoing political instability in Haiti, the Public Health Association of Haiti (Association de santé publique d'Haïti – ASPHA) recently celebrated its 25th anniversary. Nevertheless, the difficult working environment and the substantial out-migration of Haitian professionals in recent years have created many challenges for the ASPHA.

In order to address some of these challenges, ASPHA undertook a strategic planning workshop with the goal of mapping out a two-year work plan to revitalize the Association and reaffirm its role in the development of public health in Haiti. With support from CPHA's SOPHA Program, ASPHA convened its members from around the country in the capital city of Port-au-Prince from February 19-21, 2008.

This workshop was co-facilitated by Dr. Eddy Jean Baptiste, a member of ASPHA, and Mme Hélène Valentini, a CPHA member and professional from the Institut national de santé publique du Québec (INSPQ). Mme Valentini has provided volunteer technical assistance to several SOPHA partners in recent years. With the expert guidance of these two individuals, the workshop participants spent three productive days conceptualizing and preparing the work planning.

Working group with workshop participants sharing and discussing ideas on how ASPHA can contribute to the public health policy dialogue in Haiti.

The workshop was well attended by both veterans and newcomers to the Association, each bringing their own visions, ideas and expertise to the discussions. After three full days of deliberations and work, the workshop concluded with a realistic and well-articulated two-year action plan for ASPHA.

ASPHA will validate its strategic vision and action plan at an upcoming general assembly and will continue the collaboration with the SOPHA Program to further develop its activities in Haiti.

Tribute to Dr. Allen K. Jones, former Secretary General of the World Federation of Public Health Associations

CPHA was recently saddened to learn of the death of Dr. Allen Jones. Allen fought a valiant struggle against esophageal cancer, but lost that battle on February 9, 2008 in Washington, DC.

Many at CPHA will remember Allen's guidance at the helm of the World Federation of Public Health Associations from 1997 to 2007. During that time, he was a stalwart leader in promoting the Federation and the global public health movement. Under his persistent advocacy, the Federation gained a strong voice at the World Health Organization and other international fora. The Federation grew in size, stature and effectiveness under Allen's faithful hard work, stewardship and vision.

Allen's ethical and firm commitment to global justice was the very foundation of his being. He was born into a Scottish missionary family and spent his early years in India and Pakistan. He continued his lifelong loyalty to that part of the world through his post-graduate studies as well as his career. He was a Fulbright scholar in Pakistan and fluent in both Urdu and Hindi.

If one had to sum up Allen's life, it would be to say that "he was a very good man".

Allen is survived by his wife of 17 years, Beverly, and his son Andrew, as well as 3 brothers in the United States, and a sister in Cobourg, Ontario. His immediate and extended family was the great love of his life. Our sincere condolences are extended to each and every one of them, and most particularly to Beverly and Andrew.

Fanning the Flames of Safety: A CPHA Internship in Cape Town, South Africa

by Amanda Tavares

Visiting the site of a shack fire in East London, South Africa. The community is now rebuilding.

Despite assurances from friends and family following graduation, I felt a need to hone the skills obtained during my post-secondary education. I discovered an overseas internship placement with the Paraffin Safety Association of Southern Africa (PSA), through the Canadian Society for International Health's (CSIH) Young Professional Placement Program. This placement opportunity, funded by the Canadian International Development Agency (CIDA) and managed by both Net Corps Canada and CSIH, was organized through CPHA.

PSA, located in Cape Town (South Africa), was established in 1996 to address the safety needs of the public who use paraffin (kerosene) as an energy source in homes. Many of the impoverished households in South Africa rely on paraffin for lighting, heating and cooking. Every year, hundreds of kerosene-generated fires break out. Kerosene intoxication is another public health issue, linked to the lack of standards related to poor-quality paraffin appliances and their unregulated packaging, distribution and storage. PSA lobbies governments for the enforcement of standards and educates communities about safe paraffin usage. Today, a compulsory standard for non-pressurized paraffin appliances exists to help minimize the number of incidents. PSA's efforts have also resulted in thousands of individuals receiving training on the prevention and treatment of paraffin-related incidents.

In 2006, the PSA launched a pilot study at two health care facilities in Umlazi (Durban) to improve the planning, implementation, monitoring and evaluation of their paraffin-related health promotion programs through the use of a Geographic Information System-based database. This pilot study collected burn and ingestion data from two local facilities, which were later entered into the database and mapped out. Under the mentorship of Dehran Swart, Senior Project Manager of Research and Education, I was responsible for updating and editing the current system. Through my efforts, the database now contains information from eight different institutions.

On a professional level, this internship has contributed to the development of a variety of skills including developing surveys, implementing quality control measures, constructing databases, facilitating workshops, writing articles and presenting at conferences. Ultimately, these activities have raised my self-confidence and prepared me for a career in public health. On a personal level, I had the opportunity to meet some amazing people who welcomed me into their families and shared with me the South African culture. The Young Professional Placement Program has been a whirlwind experience that I will never forget and would recommend to any new graduates looking for the chance to gain practical experience and to travel. Thank you to CPHA and the other organizations involved that made this placement possible!! ♣

Team Leader UNICEF: European Union/EuropeAid Project "Improvement of Mother and Child Health Services in Uzbekistan"

UNICEF Uzbekistan seeks a Public Health Specialist (P4) on a temporary fixed-term basis (up to 3 years) for its country office in Tashkent. Interested candidates should contact Mr. Radu Leontescu (rleontescu@unicef.org), Operations Manager, UNICEF Uzbekistan Office for job description and additional information. Application deadline is April 7, 2008. ♣

CPHA Continues Its Support to Global Tobacco Control

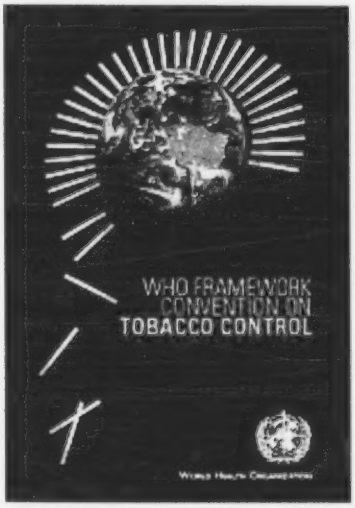
Tobacco use is one of the chief preventable causes of death in the world. The World Health Organization (WHO) attributes 4.9 million deaths a year to tobacco, a figure expected to rise to more than 10 million deaths a year by 2030. It is predicted that within 20 years, tobacco dependence will become the world's single largest cause of premature death and disability.[1] Data from several countries suggest that the opportunity cost of smoking for poor people is very high. Studies have found that many poor families spend more on tobacco than on health care or education. As one WHO publication points out, tobacco is a relevant and significant contributor to the conditions that affect the achievement of the Millennium Development Goals.[2]

The preamble to the Framework Convention on Tobacco Control (FCTC), the world's first international public health treaty, calls on all Parties to "recognize that cigarettes and some other products containing tobacco are highly engineered so as to create and maintain dependence …". The FCTC calls on all Parties to design, implement and assess effective smoking prevention and cessation programs, including diagnosis and treatment of tobacco dependence and counselling services.

Health professional associations, including national public health associations, are well placed to contribute to and provide leadership in tobacco control efforts in several ways: 1) produce the basis for and advocate using evidence-informed, relevant and effective tobacco control policies and programs; 2) monitor the implementation of FCTC Articles and the effectiveness of tobacco demand reduction strategies; 3) convene and build alliances and coalitions with other non-governmental organizations to enhance civil society's voice on tobacco control and link to regional and international tobacco control networks; 4) work with training programs for health professions to incorporate the teaching of best practices in tobacco control in the curriculum; and 5) work with health professionals to enhance their capacity to have an impact on tobacco prevention and cessation.

CPHA has been involved in tobacco control since 1959. That year saw the Association pass a pioneering resolution urging health agencies to support anti-tobacco educational campaigns in the hope of preventing tobacco addiction among youth. After four decades of work in the national arena, CPHA took its tobacco control expertise international in 1995. Since that time, the Association has worked in over a dozen countries countering the addictive power of nicotine and the serious effects of smoking on health.

Over the past few years, with financial support from Health Canada and the Canadian International Development Agency, CPHA has assisted public health association partners in several countries (Niger, Burkina Faso, Tanzania, Mozambique, Uganda, Haiti, Serbia and Bosnia & Herzegovina) to design and implement a variety of tobacco control activities in their respective countries. The results have been impressive. In Niger, the PHA partner increased awareness among students and teachers in primary and secondary schools about the risks to health associated with tobacco. The PHA in Mozambique advocated to parliamentarians for ratification of the FCTC and the adoption of bans on smoking in public places. In Serbia and in Bosnia & Herzegovina, CPHA supported the implementation of the first-ever surveys of students enrolled in faculties of medicine, nursing,

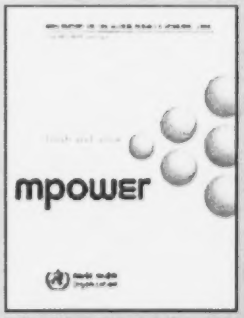


pharmacology and dentistry on smoking prevalence and their attitudes and behaviour with respect to tobacco products. The survey results indicated very high smoking prevalence among medical students in particular. This is cause for concern with respect to their capacity to become effective counselors for smoking prevention and cessation.

CPHA is very pleased to inform its members that Health Canada approved funding in late February for a new project that will support a continuation of CPHA's collaboration with PHAs in Africa on global tobacco control. ♣

References

1. World Health Organization. Policy recommendations for Smoking Cessation and Treatment of Tobacco Dependence. 2003.
2. World Health Organization. The Millennium Development Goals and Tobacco Control: An opportunity for global partnership. 2005.

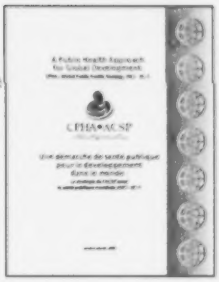


Tobacco use is a risk factor for six of the eight leading causes of death in the world. According to a report released by the World Health Organization in February, the tobacco epidemic currently is responsible for the death of 5.4 million people a year from lung cancer, heart disease and other illnesses. The tobacco epidemic is man-made and entirely preventable. The WHO Report on the Global Tobacco Epidemic 2008 – The MPOWER Package (http://www.who.int/tobacco/mpower/en/index.html) presents six policies that can reverse the epidemic. WHO is also working with several partners, including CPHA, to support developing countries to implement their national tobacco control strategies. ♣

CPHA's Global Public Health Strategy

Over the past 25 years, CPHA has contributed to building public health capacity in over 80 low- and middle-income countries. The cumulative reach of these initiatives exceeds several million people. Working in partnership and contributing to building the organizational and performance capacity of Ministries of Health, institutes of public health, public health associations and other health sector organizations in low- and middle-income countries has proven to be an effective means of improving public health capacity and competence.

The Association felt it was time to take stock of what had been achieved and to put into place a strategy to guide the Association in its international activities over the next several years. The Board of Directors endorsed the new CPHA Global Public Health Strategy 2007–2017 at its meeting in February 2008. "A Public Health Approach for Global Development" presents a strategy that is based on the principle of equitable and universal access for all to the conditions that affect human health. The strategy is composed of four major axes:



- contribute to strengthening civil society's voice in public health;
- enhance and expand public health leadership;
- foster and manage effective partnerships for public health; and
- mobilize the Canadian public health community for the development of a strong, competent international public health community.

The new strategy can be found on the CPHA website. We encourage you to read it. ♣

Policy, from page 1...

top pan-Canadian public health issues in 2008 that the Association might consider priorities.

♣ The 2008 AGM

At the Annual General Meeting in Halifax, June 3, 2008, CPHA will report on its Strategic Plan and the results achieved in the previous 12 months, with particular attention to the policy and advocacy areas. The results of both the environmental scan and the survey will be presented.

An "Open Mike" session will be introduced at this year's AGM. Members will be invited to speak briefly on issues that they wish to bring to the Board's attention. This will not require motions, resolutions or voting by the membership.

Results of the membership survey and the AGM Open Discussion will be forwarded to the Advisory Council and the Board of Directors for consideration along with the Advisory Council's environmental scan. Action could include, but is not limited to, the establishment of a policy working group, letters to decision-makers, communication and awareness campaigns, communication with coalitions such as the Canadian Coalition for Public Health in the 21st Century and possible advocacy campaigns. Individual CPHA members will be engaged in many of these activities and the overall results will be shared with all CPHA members.

Priorities and Action

Information from the Advisory Council, from the Membership Survey, and from the AGM will enrich the work of the Board by helping to identify and evaluate a strategic focus for the Association on an ongoing basis.

The Board Working Group will continue its work over the next few months and report to the AGM. Some of the new processes being explored include the formation of expert groups to work on policy or position statements in a particular area. These expert groups could involve volunteer members and the Advisory Council, or perhaps the identification of an expert to provide a background paper. Another option being explored is an annual CPHA Policy Forum, likely to be held at the time of our National Conference and open to all conference delegates.

We are excited about the prospect of an improved policy development and action process for CPHA and for working on priority issues with CPHA's partners through the Advisory Council and with CPHA members.

I would like to take this opportunity to thank all those CPHA members who have contributed their expertise in a variety of areas and forums on behalf of CPHA over the years. We look forward to our continued and expanded work together. ♣

Ron de Burger, CPHA Chair

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public health issues that are priorities for our members, Board, Advisory Council, and key stakeholders. The new policy development process currently being discussed (see page 1 of this issue) will ensure that we are proactive and strategic while increasing the involvement of CPHA members.

As we prepare for our centenary celebrations, CPHA will be challenged to find new ways of accomplishing its mission. In overcoming these challenges, CPHA will draw upon its legacy of excellence, a spirit of innovation and the dedication of our membership to be Canada's Public Health Leader. ♣

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